

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2004

Application or Docket Number

09/943392

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	27 minus 20 =	7
INDEPENDENT CLAIMS	8 minus 3 =	5
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

SMALL ENTITY
TYPE OTHER THAN
OR SMALL ENTITY

RATE	Fee	RATE	Fee
BASIC FEE	395.00	BASIC FEE	790.00
X	<input type="checkbox"/>	X	18 <input type="checkbox"/>
X	<input type="checkbox"/>	X	80 <input type="checkbox"/>
+	<input type="checkbox"/>	+	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>	TOTAL	<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	27	Minus	27
Independent	7	Minus	8	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

SMALL ENTITY OR OTHER THAN
OR SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X	<input type="checkbox"/>	X	<input type="checkbox"/>
X	<input type="checkbox"/>	X	<input type="checkbox"/>
+	<input type="checkbox"/>	+	<input type="checkbox"/>
TOTAL ADDITIONAL FEE	<input type="checkbox"/>	TOTAL ADDITIONAL FEE	<input type="checkbox"/>

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	***	=
Independent	Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X	<input type="checkbox"/>	X	<input type="checkbox"/>
X	<input type="checkbox"/>	X	<input type="checkbox"/>
+	<input type="checkbox"/>	+	<input type="checkbox"/>
TOTAL ADDITIONAL FEE	<input type="checkbox"/>	TOTAL ADDITIONAL FEE	<input type="checkbox"/>

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	***	=
Independent	Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X	<input type="checkbox"/>	X	<input type="checkbox"/>
X	<input type="checkbox"/>	X	<input type="checkbox"/>
+	<input type="checkbox"/>	+	<input type="checkbox"/>
TOTAL ADDITIONAL FEE	<input type="checkbox"/>	TOTAL ADDITIONAL FEE	<input type="checkbox"/>

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.